



DIVISION OF BANKING

233 Richmond Street, Suite 231
Providence, Rhode Island 02903-4231
Telephone (401) 222-2405 - Facsimile (401) 222-5628 - TDD (401) 222-2999

APPLICATION FOR LENDER / SMALL LOAN LENDER / LOAN BROKER LICENSE

Dear Applicant:

Enclosed is the application package you requested. This application form may be used to apply for three (3) types of licenses as indicated by the choices. A <u>separate application</u> must be completed for <u>each type of license requested</u> along with all the supplemental documentation requested. Photocopy the application as many times as is needed.

For each application filed, applicant must execute a Power of Attorney, unless exempt pursuant to R. I. Gen. Laws § 19-14-10, as amended, and submit a Power of Attorney Filing Fee of Twenty-Five Dollars (\$25).

A non-refundable investigation fee of Five Hundred Fifty Dollars (\$550) for each Lender Application, Two Hundred Seventy Five Dollars (\$275) for each Loan Broker Application and Two Hundred Seventy Five Dollars (\$275) for each Small Loan Lender Application is required. **IF THE APPLICATION IS APPROVED**, an annual license fee for each license approved shall be paid pursuant to R. I. Gen. Laws § 19-14-4.

All information and documentation requested must be submitted concurrently, pursuant to R. I. Gen. Laws § 19-14-8. If, within sixty (60) days of the initial filing of the application, the applicant has failed to provide the necessary factual data in order to complete the application, the director or the director's designee shall notice the applicant, by certified mail, that the application shall be considered in default and rejected if all necessary data for a completed application is not received by the Division of Banking ("Division") on or before the date specified in the notice unless the applicant files with the Division written notice that the application has been withdrawn.

If this application was received more than six (6) months before the expected filing date please contact this office to confirm that the forms provided are still in use. Any questions regarding this application or the applicable bond, should be directed to the Licensing Examiner at (401) 222-2405.

Cover Lender Small Loan Lender Loan Broker Rev. 10/14/2003





DIVISION OF BANKING

233 Richmond Street, Suite 231
Providence, RI 02903-4231
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APPLICATION FOR LENDER / SMALL LOAN LENDER / LOAN BROKER LICENSE

NOTE: THIS APPLICATION FORM WAS LAST REVISED ON 07/06/2006. IF THE SIGNATURE PAGE (PAGE 9) OF THE APPLICATION CONTAINS A DATE OTHER THAN 07/06/2006, CONTACT THE DIVISION OF BANKING AT 401-222-2405 TO OBTAIN AN UP-TO-DATE FORM.

Application is hereby made pursuant to Chapter 14 of Title 19 of the General Laws of Rhode Island for a license to engage in the business indicated below (a separate application is required for each license being requested):

CHECK ONLY ONE Section 19-14.1 Lender - Any person who makes or funds a loan with

such person's own funds, regardless whether such person is the nominal mortgagee or creditor on the instrument evidencing the loan, and any person who purchases or acquires retail installment contracts.
Section 19-14.1 Loan Broker - Any person who, for compensation or gain, or in the expectation of compensation or gain, either directly or indirectly, solicits, processes, negotiates, places or sells a loan for others in the primary market, or offers to do so. A loan broker is also any person who is the nominal mortgagee or creditor in a transaction commonly called "table funding" wherein there is a contemporaneous advance of funds by a lender and an assignment by such mortgagee or creditor of the loan to such lender.
Section 19-14.2 Small Loan Lender - Any lender engaged in the business of making a loan of less than five thousand dollars (\$5,000.00), not secured by real estate, made pursuant to the provisions of Chapter 19-14.2.
cant:
NTIFICATION NUMBER

2. Name Under Which Business is to be Transacted (if other than the name in #1 above):

	[Attach the D/B/A Form / Fictitious Name Statement from the appropriate City, Town, County, or State authority.]
3.	Main Office Address at which the Business will be conducted:
	Street Address
	City, State, Zip Code
	Telephone Number
	A Zoning Certificate is required if the above location is a residence. A license may be issued to a location outside of the State of Rhode Island.
	The license applied for will be issued in the name provided in #2 above for business to be conducted at the address provided in #3 above. License renewal and annual report forms as well as other mai will be sent to the main office address (#3 above). It is the obligation of the licensee to ensure that deadlines for renewal and reporting are met, and that local managers forward all such correspondence to the official responsible for completing and filing such forms in a timely manner
1.	Branch locations:
	Will the applicant be engaged in the business for which the license is being requested at any location(s other than the main office location listed in item 3 above?
	YES NO
	If YES , the applicant must complete and file an application for a branch certificate for each location from which it intends to be engaged in the business for which the license is being requested.
5.	Other Business:
	Will any business other than lending or loan brokering be conducted at any location for which the license is being requested?
	YESNO If YES, applicant must provide the following information:

b. The names of the principals of the other business(es) being requested and their relationship to applicant; and

a. A description of the other business(es);

c. The relationship, if any, between applicant and the other business(e) such as financial arrangements, sharing of common floor space, sharing of equipment, common entrance, common signage, referrals, etc.

No such other business shall be conducted at any location for which a Rhode Island license may be issued, until authorized in writing by the Director of Business Regulation ("Director") or the Director's designee pursuant to R. I. Gen. Laws \S 19-14-24.

	If YES, complete Part I and forward to the other state(s) for completion of Part II, of the enclosed Certification by Licensing Agency/Supervisory Board form along with a stamped envelope addressed to the Rhode Island Division of Banking with each form. Attach a schedule listing the name and address of the licensing authority for each state where the applicant is authorized to do business.
	Will the Applicant conduct the business of lending/loan brokering which is subject to the laws of another state at the location for which a Rhode Island license is being requested?
	YES NO
7.	Form of organization (Check Only One):
	Corporation General Partnership Limited Liability Company Sole Proprietorship Limited Partnership Association Other (explain)
	State in which business is organized
8.	Manager of Proposed License:
	Provide the information requested below for the person designated to operate the licensed business:
	Name
	Residence Address
	City, State, Zip Code
	Date of Birth
	The individual named above must have at least five (5) years of experience in the type of business for which a license is being sought, including, without limitation, employment, supervision, or independent work experience. Attach a resume and employment history. The employment history must include then names and addresses of present and former employers and the number, complexity and types of transactions handled in relation to the type of license sought by the application. Experience for a lessor period than five (5) years will be considered in individual circumstances depending upon such factors as the individual's educational experience, the complexity of transactions in relation to the type of license sought by the application and the level of supervision and oversight over the individual by a person having at least five (5) years of qualified experience.
	To enable the Division to determine whether the applicant will operate the business honestly and in accordance with the standards established in Title 19, Chapter 14, a criminal background check will be performed on the designated manager. Any Bureau of Criminal Identification ("BCI") report information

YES _____ NO ____

6. Is the Applicant Licensed in any Other State?

and completed authorization for background check (2 page form enclosed).

received as the result of this criminal background check will be treated as confidential information and will not be open to public inspection at anytime. The individual named in 8 above shall submit a signed

9. **History of Applicant:**

10.

Respond **YES or NO** in the space provided and attach a signed explanation for all affirmative responses on a separate sheet for questions A through E below. Has applicant ever:

a. Made application for a financial license in this state or any other state that withdrawn, or had a financial license suspended, revoked or cancelled?			nat was de	enied, refused or			
						YES	NO
	Been enjoined or re connection with the		•	•	•	•	et or practice in
c.						YES	NO
c.	Adversely been the s state or other author requested?						
	requested.					YES	NO
d.	Been the subject of a	ny bankru	ptcy, receiv	ership, or ins	solvency proceed	ings?	
						YES	NO
e.	For any violation of	law other t	han a moto	or vehicle viol	ation been (chec	k all that a	apply)?
		Arrested:	YES	NO	Prosecuted	: YES	NO
		Indicted:	YES	NO	Convicted:	YES	NO
Ag	ent for Service of Pr	ocess:					
off	ovide the information ricial of the applicant, co.10:	•		•			•
Na	me _						
Str	eet Address						
Cit	y, State, Zip Code						
Tel	lephone Number						

11. All Lender and Small Loan Lender Applicants Enclose the following:

The information requested below for the person located in Rhode Island that the applicant has designated as its resident agent with authority to endorse insurance claim checks on behalf of the applicant pursuant to R. I. Gen. Laws §§ 5-38-26 and 27-5-3.3. This requirement is applicable whether or not the applicant will service loans funded with ownership retained. This requirement does not apply to applicants whose loans will be sold upon funding or to applicants that do not make loans secured by insurable collateral.

Name	
Street Address	
City, State, Zip	
Telephone Number	

12. All Lender ad Loan Broker Applicants Provide the Following:

- a. The name and address of the federal-insured-deposit-taking institution in which the pre-paid fee escrow account required by R. I. Gen. Laws § 19-14.1-8 will be established. This is not required if the Applicant states that it will not accept any fees from the borrower prior to closing.
- b. Prior to issuance of the license, applicant shall provide evidence to the Division of Banking that the above escrow account has been established.

13. All Applicants Provide the Following:

- a. A description of past activities conducted by the applicant and a history of operations. If applicant is a new business, **a three (3) year business plan** must be provided which includes prospective statements of condition and statements of income and expenses prepared in accordance with generally accepted accounting principles.
- b. A description of the business activities in which the applicant seeks to be engaged in this State.
- c. A statement that describes the community to be served by the applicant and how the proposed licensee will promote the convenience and advantage of the community to be served.
- d. An investigation fee for each application submitted, made payable to the General Treasurer, State of Rhode Island, as provided in R. I. Gen. Laws § 19-14-3 as follows:

Lender Applicants	\$550.00
Loan Broker applicants	\$275.00
Small Loan Lender Applicants	\$275.00

If the license application is approved, a license fee will be requested. Do not send the license fee with the application as it will be returned and may result in delays in the processing of the application.

13. All Applicants Provide the Following (continued):

e. A **signed** financial statement for the proposed licensed business prepared and dated **not more than sixty (60) days** prior to the application date showing assets, liabilities and net worth, prepared in accordance with generally accepted accounting principles. Each licensee must maintain minimum net worth as indicated below:

MINIMUM NET WORTH REQUIREMENTS

Lender Applicants	\$100,000.00
Loan Broker Applicants	\$ 10,000.00
Small Loan Lender Applicants	\$ 25,000.00

- f. A Power of Attorney, pursuant to R. I. Gen. Laws § 19-14-10, on the form provided naming the attorney for the service of process as shown on question number 10 and a \$25 filing fee. (CORPORATIONS THAT HAVE COMPLIED WITH THE PROVISIONS OF CHAPTER 1.1 OF TITLE 7, AND LIMITED PARTNERSHIPS OR LIMITED LIABILITY COMPANIES THAT HAVE COMPLIED WITH THE PROVISIONS OF CHAPTERS 13 AND 16, RESPECTIVELY, OF TITLE 7, ARE EXEMPT FROM THE POWER OF ATTORNEY FILING.)
- g. A bond on the form provided, <u>executed by a SURETY COMPANY</u> licensed to do business in Rhode Island, in the amount as indicated below. The bond form should be photocopied as necessary. The bond must be issued to the applicant as stated in the response to question two (2) of page one (1) of the application showing the address of the proposed licensed main office. If the applicant will be using a d/b/a, the bond should be executed as "[Applicant] d/b/a [Name to be Used]". The bond must contain original signatures of both an officer of the Applicant and a Representative of the Surety and include a surety power of attorney for the individual signing on behalf of the surety.

MINIMUM BOND REQUIREMENTS

Lender Applicants	\$25,000.00
Loan Broker Applicants	\$10,000.00
Small Loan Lender Applicants	\$10,000.00
Each Branch Office of Applicant	\$ 5,000.00

NOTE: Any bond executed pursuant to this application shall be retained by the Division of Banking, after the surrender or revocation of the applicable license or the cancellation of said bond, for a period of time sufficient to exhaust the statute of limitations for causes of action related to the licensed activities of the applicant.

14. All Corporate and Limited Liability Company Applicants Provide the Following:

a. Name (complete first name), title, residence and business address, <u>date of birth</u> and name of other business or occupation of all officers, directors and/or members along with a signed and completed authorization for background check (2 page form enclosed) for each officer, director and/or member. Each director, principal officer and/or member shall provide a signed financial statement which is dated <u>not more than sixty (60) days</u> prior to the application date, showing assets and liabilities and positive net worth. The financial statement must be prepared in accordance with generally accepted accounting principles and will be treated as confidential information that is not open to public inspection at anytime.

14. All Corporate and Limited Liability Company Applicants Provide the Following (continued):

- b. The names (complete first name) of any holder of 10% or more of the outstanding voting stock or equity interest in the applicant. Include residence and business address, **date of birth** and name of other business or occupation **along with a signed and completed authorization for background check (2 page form enclosed) for each natural person who holds 10%** or more of the outstanding voting stock or equity interest. Provide a financial statement **signed** by each holder of 10% or more of the outstanding voting stock or equity interest in the applicant, which is dated **not more than sixty** (60) days prior to the application date, showing assets and liabilities and positive net worth. The financial statement must be prepared in accordance with generally accepted accounting principles and will be treated as confidential information that is not open to public inspection at anytime.
- c. A certified copy of the corporate charter or articles of incorporation, if a corporation, or articles of organization, if a limited liability company.
- d. A certified copy of the corporate by-laws, if a corporation, or the operating agreement, if a limited liability company.
- e. A description of the business structure of the applicant, including the identity of any parent or subsidiary of the applicant, and the disclosure of whether any parent or subsidiary is publicly traded on any stock exchange.
- f. A certified copy of the resolution of the board of directors, which authorizes the filing of this application. The officers/persons who sign this application **must** be named in the resolution. Limited liability companies must provide a substantially similar resolution.
- g. If a corporation, a Certificate of Authority or a Certificate of Good Standing dated not more than sixty (60) days from the filing of this application **issued by the Rhode Island Secretary of State.**

If a limited liability company, a Certificate of Good Standing or a Certificate of Registration dated not more than sixty (60) days from the filing of this application **issued by the Rhode Island Secretary of State**.

15. All Partnership and Association Applicants Provide the Following:

- a. Name (complete first name), residence and business address, <u>date of birth</u> and name of other business or occupation of each partner along with a signed and completed authorization for background check (2 page form enclosed) for each partner. Designate the percentage of their interest in the partnership and whether the partner is a limited or general partner.
- b. A signed financial statement, <u>dated not more than sixty (60) days prior to the application date</u>, for each partner, showing assets and liabilities and positive net worth. The financial statement must be prepared in accordance with generally accepted accounting principles and will be treated as confidential information that is not open to public inspection at anytime.
- c. A certified copy of the Articles of Partnership or Association.

15. All Partnership and Association Applicants Provide the Following (continued):

- d. A certified copy of the resolution of the partners, which names the officers/persons, authorized to file and sign this application.
- e. Limited Partnerships must provide a Certificate of Limited Partnership from the Rhode Island Secretary of State.
- f. General Partnerships must provide a Certificate of General Partnership from the City or Town in which they are registered.

16. All Sole Proprietorships Applicants Provide the Following:

- a. A **signed** personal financial statement dated **not more than sixty (60) days** prior to the application date showing assets, liabilities and net worth for each owner. The financial statement must be prepared in accordance with generally accepted accounting principles; and
- b. Each owner of the proprietorship shall also file a signed and completed authorization for background check (2 page form enclosed). This form will be treated as confidential information that is not open to public inspection at anytime.

17. Applicant's Attestation:

15

By Signing this Application, the Undersigned Attests to the Fact That, as a Condition of Licensing, the Applicant Agrees to the Following:

- a. To inform the Division of Banking **prior to** any changes (changes reported on the annual report do not constitute proper notification) relative to:
 - i. Location of its main or branch offices;
 - ii. Location of its records;
 - iii. Manager of licensed or branch office;
 - iv. Ownership of the business;
 - v. Name or d/b/a of applicant;
 - vi. The bond of the applicant; and
 - vii. Responses to questions 5, 7, 9, 10, 11 and non-financial information contained in questions 14, and 16.
- b. That it has obtained and reviewed copies of all applicable state and federal regulations and statutes governing the proposed business activity. Copies of the relevant regulations and statutes may be obtained from the following agencies:

Rhode Island Statutes

LexisNexis
Mathew Bender & Co., Inc.
1275 Broadway
Albany, NY 12204-2694
1-800-562-1197 or www.lexisnexis.com/bookstore

Rhode Island General Assembly State House Providence, RI 02903 www.state.ri.us

17. **Applicant's Attestation** (continued):

b. (continued)

Rhode Island Regulations

Division of Banking 233 Richmond Street, Suite 231 Providence, RI 02903 (401) 222-2405 or www.dbr.state.ri.us

Federal Regulations

Federal Reserve Bank of Boston 600 Atlantic Avenue Boston, MA 02106 (617) 973-3000

- c. That any licensee who maintains its records in an out-of-state office will pay all examiners' expenses incurred in order to conduct an examination of the books and records at said out-of-state facility, in addition to any examination fees allowed by statute.
- d. That there is no statutory provision for an "inactive" license. Any licensee whose license has not been surrendered or revoked shall be subject to all provisions of statute and regulations, which are applicable to a licensee.
- e. That it shall comply with all statutory reporting and filing requirements and that all examination and filing fees will be paid.
- f. That any written or oral advertisement or representation disseminated primarily in this state shall disclose the type of license held.

g. NET BRANCH AND/OR NET BRANCH ARRANGEMENTS

Applicant further attests to the fact that Applicant has read the enclosed Banking Bulletin Number 2003-2 entitled Prohibited Net Branches & Net Branching Arrangements and that Applicant does not and will not transact the business under the license requested by this application in any manner which would involve either a net branch or a net branch arrangement, as defined in said Banking Bulletin Number 2003-2.

NOTE: All information and documentation requested must be submitted concurrently. Pursuant to R. I. Gen. Laws § 19-14-8, if, within sixty (60) days of the initial filing of the application, the applicant has failed to provide the necessary factual data in order to complete the application, the director or his or her designee shall notice the applicant, by certified mail, that the application shall be considered in default and rejected if all necessary data for a completed application is not received within fourteen (14) days of said notice unless the application is withdrawn in writing.

The applicant, in signing this application, affirms under oath that the responses in the application and all documents appended thereto are true and accurate.

THE APPLICANT IS SIGNING FOR AN ENTITY THAT IS A:

Only authorized officers of the applicant may sign the application on this page. Signatures on this page must be original.

<u> </u>	Limited Pa	ability Company	General Partnership Sole Proprietorship Association
Signed at(City, State)	, this	day of	, 20
	(Busine	ss Name)	
by,(Type or Print Name)		Signature	Title
by,(Type or Print Name)		Signature	Title
by,(Type or Print Name)		Signature	Title
Subscribed and sworn to before me	this day	y of	, 20
Notary Public			Notary Seal
My commission expires		_, 20	Hotary Boar

Application for Lender-Small Loan Lender Loan Broker 07-06-2006



Surety Name:_

Surety's Attorney-in-Fact BY:_ Bond Lender 2003 10/14/2003

State of Rhode Island Department of Business Regulation



DIVISION OF BANKING

233 Richmond Street, Suite 231 Providence. Rhode Island 02903-4231

	Flovidence, Knode Island 02505-4251				
]	LENDER BOND		
	Bond Number_				
WHERE	AS application has beer	n made to the Director of Busin	ness Regulation of the Sta	ate of Rhode Island and I	Providence Plantations by:
Name:					
Address:					
City, Stat	e, Zip:				
Note:	If partnership, give fu	give full individual name and partnership name and busin give full business name and	ess address. Give trade n	ame if applicable.	
		ant" or "obligor", for a license t General Laws of Rhode Island		Rhode Island the business	s of a lender as provided for by Title
(\$25,000	plus and additional sur	n of Five Thousand Dollars (\$5	(,000) for each branch loca	tion from which it shall c	of <u>Twenty-five Thousand Dollar</u> onduct the business provided for by e Director of Business Regulation
			NOW ALL MEN BY T	HESE PRESENTS	
That said	applicant known as,		(insert full name)		
or as any	future name by which s	said organization shall be know			
		(insert fu	ll name and address of su	rety)	
have a ca Thousand	use of action against sa Dollars (\$ to be made we bind our	id obligor of this bond under t) in the aggregate to be j	he provisions of said chap paid unto said State of Rho	oters, in the penal sum of de Island and Providence	of any person or persons, who may f Plantations, to which payment wel ens, jointly and severally, firmly by
said Chap Regulation and/or to	ters, the title of which is on thereunder, and shall	s above set forth, and all amend pay to said State and to any su s from said obligor, under and	lments thereto and all rule ach person or persons any	s and regulations lawfull and all monies that may	ide by each and every provision o y made by the Director of Busines become due or owing to said State n this obligation shall be void, bu
This bone	I shall continue in force (1) By order of the	e and effect unless, as to future	e acts or omissions of the	Obligor, it is terminated	or cancelled:
	(2) By the Surety do 31st. The bond	elivering on or before February	ch 31st upon notice and p	ayment of a Twenty-five	he same will be cancelled on March Dollars (\$25) Cancellation fee. received written notice.
		any liability incurred or accruinue until the expiration of the			by said Division or termination by ion.
This bone	l shall take effect on an	d as of	, 20	and shall continue in fo	orce until it is terminated or cancelled
of the app to those a	licable license, or the ca	ancellation of said bond, for a p	period of time sufficient to	exhaust the statute of lin	ng, after the surrender or revocation nitations for causes of action related t upon withdrawal or denial of the
IN	WITNESS WHEREO	F we have hereunto set our ha	nds and seals, this	day of	20
Sole Prop	rietor BY:				
Partnersh	ip/Association Name:_	(76	1	-:	
Corporat	on manne.		DY (Autnofize	au Officer):	





DIVISION OF BANKING

233 Richmond Street, Suite 231 Providence, Rhode Island 02903-4231

LOAN BROKER BOND

	Bond Number
WHERE	AS application has been made to the Director of Business Regulation of the State of Rhode Island and Providence Plantations by:
Name:	
Address:	<u>. </u>
City, Sta	te, Zip:
Note:	If sole proprietorship, give full individual name and business address. Give trade name if applicable. If partnership, give full partnership name and business address. Give trade name if applicable. If corporation or LLC, give full business name and business address and State where organized. Give trade name if applicable.
	ter referred to as "applicant" or "obligor", for a license to conduct, in the State of Rhode Island the business of a loan broker as provided for by Chapters 14 and 14.1 of the General Laws of Rhode Island 1956, as amended.
plus and	AS said applicant is required to execute one bond payable to said State of Rhode Island in the penal sum of <u>Ten Thousand Dollars (\$10,000)</u> additional sum of Five Thousand Dollars (\$5,000) for each branch location from which it shall conduct the business provided for by Title 19, s 14 and 14.1 of the General Laws of Rhode Island 1956, as amended, and file the same with the Director of Business Regulation.
	NOW THEREFORE KNOW ALL MEN BY THESE PRESENTS
That said	1 applicant known as,
	(insert full name)
or as any	future name by which said organization shall be known as obligor, and
	(insert full name and address of surety)
Thousan and truly these pre TH said Cha Regulati and/or to	ause of action against said obligor of this bond under the provisions of said chapters, in the penal sum of
This bon	d shall continue in force and effect unless, as to future acts or omissions of the Obligor, it is terminated or cancelled: (1) By order of the Director; or (2) By the Surety delivering on or before February 28 written notice to said Division of Banking that the same will be cancelled on March 31st. The bond may be cancelled before March 31st upon notice and payment of a Twenty-five Dollars (\$25) Cancellation fee. (3) Termination shall not become effective until thirty (30) days after the Division of Banking has received written notice.
	ncellation shall not affect any liability incurred or accrued hereunder prior to the cancellation of said bond by said Division or termination by which liability shall continue until the expiration of the applicable statute of limitations for causes of action.
This bon	d shall take effect on and as of, 20 and shall continue in force until it is terminated or cancelled.
of the ap	OTE: Any bond executed pursuant to the license being requested shall be retained by the Division of Banking, after the surrender or revocation plicable license, or the cancellation of said bond, for a period of time sufficient to exhaust the statute of limitations for causes of action related activities governed by the license being requested. The bond may, however, be returned to the applicant upon withdrawal or denial of the pplication.
IN	WITNESS WHEREOF we have hereunto set our hands and seals, this day of 20
Sole Pro	prietor BY:
Partnersl	hip/Association Name:
	(If partnership, each partner must sign)
	Partner BY:
_	tion Name:BY (Authorized Officer):
-	lame:
	Attorney-in-Fact BY:



Bond Number

State of Rhode Island Department of Business Regulation



DIVISION OF BANKING

233 Richmond Street, Suite 231 Providence, Rhode Island 02903-4231

SMALL LOAN LENDER BOND

WHERE	AS application has been made to the Director of Business Regulation of the State of Rhode Island and Providence Plantations by:
Name:	
Address:	
City, Stat	te, Zip:
Note:	If sole proprietorship, give full individual name and business address. Give trade name if applicable. If partnership, give full partnership name and business address. Give trade name if applicable. If corporation or LLC, give full business name and business address and State where organized. Give trade name if applicable.
	ter referred to as "applicant" or "obligor", for a license to conduct, in the State of Rhode Island the business of a small loan lender as provide the 19, Chapters 14 and 14.1 of the General Laws of Rhode Island 1956, as amended.
plus and a	AS said applicant is required to execute one bond payable to said State of Rhode Island in the penal sum of <u>Ten Thousand Dollars (\$10,00 additional sum of Five Thousand Dollars (\$5,000) for each branch location</u> from which it shall conduct the business provided for by Title 1 4 and 14.1 of the General Laws of Rhode Island 1956, as amended, and file the same with the Director of Business Regulation.
	NOW THEREFORE KNOW ALL MEN BY THESE PRESENTS
That said	applicant known as,
	(insert full name)
or as any	future name by which said organization shall be known as obligor, and
	(insert full name and address of surety)
have a ca Thousand and truly these pres	
said Char Regulation and/or to	E CONDITION OF THIS BOND IS SUCH that if the above bounden obligor shall conform to and abide by each and every provision of oters, the title of which is above set forth, and all amendments thereto and all rules and regulations lawfully made by the Director of Busine on thereunder, and shall pay to said State and to any such person or persons any and all monies that may become due or owing to said State such person or persons from said obligor, under and by virtue of the provisions of said Chapters, then this obligation shall be void, be shall remain in full force and effect.
This bond	d shall continue in force and effect unless, as to future acts or omissions of the Obligor, it is terminated or cancelled: (1) By order of the Director; or (2) By the Surety delivering on or before February 28 written notice to said Division of Banking that the same will be cancelled on Mare 31st. The bond may be cancelled before March 31st upon notice and payment of a Twenty-five Dollars (\$25) Cancellation fee. (3) Termination shall not become effective until thirty (30) days after the Division of Banking has received written notice.
	cellation shall not affect any liability incurred or accrued hereunder prior to the cancellation of said bond by said Division or termination by thich liability shall continue until the expiration of the applicable statute of limitations for causes of action.
This bone	d shall take effect on and as of, 20 and shall continue in force until it is terminated or cancelle
of the app to those a	TE: Any bond executed pursuant to the license being requested shall be retained by the Division of Banking, after the surrender or revocation of control of the cancellation of said bond, for a period of time sufficient to exhaust the statute of limitations for causes of action related activities governed by the license being requested. The bond may, however, be returned to the applicant upon withdrawal or denial of the application.
IN	WITNESS WHEREOF we have hereunto set our hands and seals, this day of 20
Sole Prop	prietor BY:
Partnersh	nip/Association Name:(If partnership, each partner must sign)
	Partner BY: Partner BY: PV (Authorized Officer)
•	ion Name:BY (Authorized Officer):
-	ame:
	Attorney-in-Fact BY: pall Loan Lender 2003 Rev. 10/14/2003





DIVISION OF BANKING

233 Richmond Street, Suite 231
Providence, Rhode Island 02903-4231
Telephone (401) 222-2405 - Facsimile (401) 222-5628 - TDD (401) 222-2999

CUSTOMER COMMUNICATION CONTACT FORM

THIS FORM MUST BE COMPLETED AND SIGNED BY AN AUTHORIZED AGENT OF THE LICENSEE AND RETURNED WITH YOUR LICENSE APPLICATION

This Division receives communications from consumers from time to time that require contact with a licensee. So we may promptly contact the person in your company with responsibility for resolving consumer inquiries or complaints, please provide the following:

1.	Name of Applicant	
2.	D/B/A, if applicable	
3.	Proposed Main Office	
	Street Address	
	City, State, Zip Code	
4.	Hours of Operation	
5.	Contact Person	
	Name	
	Title	
	Street Address	
	City, State, Zip Code	
	Telephone Number	
	E-mail Address:	(Please provide Toll-free number, if available)
6.	Signature	
	Title	
	Date	





POWER OF ATTORNEY

\$25 FILING FEE REQUIRED

Know All Men by these Presents				
That I	of the City of			
in the County of	the County of and the State of and the State of aving applied to be licensed by the Division of Banking of the Department of Business Regulation in the			
State of Rhode Island and Providence General Laws of Rhode Island as amofand lawful attorney in the state of Rh against me may be served in like man with said process therein as provided such attorney, is hereby at of any process, writ, summons or order	e Plantations as providended, do hereby make in the City of and Island upon whom ner with the same legal by the laws of the Stauthorized and empower er whereby any suit, ac	led by Title 19 Ce, constitute and a in all lawful proce force and effect a te of Rhode Islanded as my said age tion, or proceeding.	hapter 14, as appoint the State of Rho ss in any action as if I had been d; and said nt to receive ar ag shall be com	amended, of the ode Island my true on or proceeding lawfully served od accept service namenced against
me which is served on me with the State of Rhode Island.	shall l	nave the same lega	ıl force and effe	ect as if served on
The authority given in this appointme state remains unsatisfied.	ent shall continue in for	ce so long as any	liability to any	y resident of this
In Witness Whereof I have hereunto	set my hand and seal o	on this	_ day of	20
		Signature		
In the presence of				
1. WITNESS				
2. WITNESS				
State of				
County of				
Atin sa	aid County, on this	day of		20
before me personally appeared the foreign instrument, by him sealed	•	-		and acknowledged
Before Me	D 11' \			NOTARY
(Notary	Public)			SEAL
My Commission expires			_	

Any applicant, who is a corporation that has complied with the provisions of Chapter 1.1 of Title 7, and any applicant, who is a limited partnership or limited liability company and has complied with the provisions of Chapters 13 and 16, respectively, of Title 7, is exempt from the submission of this Power of Attorney.





DIVISION OF BANKING

233 Richmond Street, Suite 231
Providence, Rhode Island 02903-4231
Telephone (401) 222-2405 - Facsimile (401) 222-5628 - TDD (401) 222-2999

AUTHORIZATION FOR BACKGROUND CHECK AND RELEASE

Company Name		
Address		
City, State, Zip Code		
I,		
	(Type or Print Full Name and Title)	
of		
(Type or P	Print Residence Address, City, State, Zip Code)	
	and social security number of	
	f Banking of the Department of Business Regulati	
•	of my general character and financial condition. T	-
used for purposes of obtaining a c	credit report on me and/or may be shared with the	ne Bureau of Criminal
Identification of the Department of	the Attorney General for the State of Rhode Islan	nd to make available to
the Department of Business Regula	tion any criminal record or other disposition that t	the Bureau of Criminal
Identification has on file in reference	ce to me.	

I hereby waive and release any and all manner of actions, cause of actions, and demands of every kind, nature and description, arising from any release of criminal records and requests there from, whatsoever against the State of Rhode Island, the Bureau of Criminal Identification, the Attorney General, the Department of Business Regulation, the employees of the Attorney General's Office and the employees and officials of the Department of Business Regulation in both law and equity which I may now have or in the future may have.

Upon submission of an application for licensure or a change in a licensee's officers, directors, manager or principal owner as defined in R. I. Gen. Laws § 19-14-1(10), each such officer, director, manager or principal owner must provide a signed response to the questions on Page 2 of 2. An affirmative response to any question requires a signed explanation. (Additional copies of this form may be reproduced as needed.)

Carre	www.Normo			
_	ny Name			
maivia	ual's Name(Type or F	Print)		
	director, officer, manager or principal stockholder or or, officer, manager, or a principal stockholder ever:	any organizat	ion in which said	person served as
	Made application for a financial license in this state withdrawn, or had a financial license suspended, rev	•	eled?	enied, refused or NO
	Been enjoined or restrained by order of any court from continuing any conduct or practice in connection with the type of activity for which a license is being requested?			
			YES	NO
	requestion.		YES	NO
4.	Been the subject of any bankruptcy, receivership, or	insolvency p	proceedings?	
			YES	NO
5.	For any violation of law other than a motor vehicle	violation beer	n (check all that a	apply):
	Arrested YES NO Prosect	uted YES	NO	
	Indicted YES NO Convic	ted YES	NO	
6.	Attach copy of a Photo ID (i.e. Valid Drivers Licens	se or ID Card.	.)	
	Manager's must also attach a resume that details the five (5) years immediately preceding this filing, educ			
The und	ersigned certifies that the above responses are true and	accurate to th	ne best of my knov	vledge and belief.
Full Naı	me (Type or Print)	_ Title		
Signatur	re	_ Date		
Notary l	Public			
•	Notary Seal , 20			

Authorization for Background Check and Release 04-28-2006





DIVISION OF BANKING

233 Richmond Street, Suite 231 Providence, RI 02903-4231 Telephone (401) 222-2405 Facsimile (401) 222-5628

CERTIFICATION BY LICENSING AGENCY / SUPERVISORY BOARD

I - APPLICANT SECTION

Applicant must complete the Applicant Section of this form and forward the entire form (front and back) to the agency / board of each state where it is currently licensed or certified.

2.

Actual name of applicant:

Applicant's name as it will appear on the License in Rhode Island:

3.		ddress and telephone number for the Rhode		pplicant's main address and telephone
	Island license (include	Street, City, Zip Code):	number	(include Street, City, Zip Code):
5.	Applicant's Endoral Em	nployer Identification Number (FEIN):	6. T	'ype of ownership:
٥.	Applicant's rederal En	iployer identification Number (FEIN):		ype of ownership: Corporation
				Partnership
			-	Limited Liability Company
				Sole Proprietorship
7.	Name of manager for r	proposed Rhode Island licensed office:	8. T	ype of license for which application is being
	r			iled:
9.	Name of principal own	ers (Holders of 10% or more of voting stock)		
				-
<u> </u>				
	10.	Information specific to each state where ap	olicant is co	urrently licensed:
A.	Applicant's name in th	at state:		ssumed name or name under which Applicant
			di	d or is doing business in that state:
C.	Address in that state, if	applicable (include Street, City, Zip Code):	D. Is	ssue and expiration date of license, certificate
	,	77		f registration or permit to do business:
			Issue I	Date:
			Expira	tion Date:
<u> </u>			1	
E.	Type and number of	license / registration held in that state:		
	License Type:	License	Number:	
The t	undersigned hereby author	orize the licensing/supervisory agency for the	state of	to furnish the State of
			(State	Providing Information)
		Business Regulation, Division of Banking, the		
Name	e (please print or type)		ше:	
Signature:Date:				
		Page 1 of 2		

II - LICENSING / SUPERVISORY AGENCY SECTION

Please return this completed form to the address at the bottom of this page. Enter N/A in areas not applicable. The Rhode Island Division of Banking will accept other forms of certification provided that all applicable information requested on this form is contained in the Certification. If the type of license in question is issued by a different agency in your state, please forward this inquiry to that agency.

1. Is the Information in Question 10 of Section I accurate?	2. Current Status of License \ Registration: Active Lapsed
Yes No	Other (please explain here:
If no, please print accurate information here:	
3. What kind of records, if any, must the company maintain	in your state?
4. Disciplinary A	Actions
A. Have there been any complaints filed against the aforemention No Yes	ed company in the past three (3) years?
If yes, please summarize the complaint and describe the remay be used if necessary.	esolution. # Filed # Outstanding Additional sheets
Have there been any formal sanctions imposed against the aforemer limited to fine, reprimand, probation, censure, revocation, suspension of the disciplinary action	
C. The Division of Banking would appreciate additional comment	ts regarding matters, which are not a public record.
I certify that the information contained in Section II herein or attache State.	ed is true and correct according to the official records of this
Print Name	Title
Signature	Date
Agency / Board	Address (Street, City, Zip Code)
Telephone Number	

RETURN FORM TO:

STATE OF RHODE ISLAND
DEPARTMENT OF BUSINESS REGULATION
DIVISION OF BANKING
233 Richmond Street, Suite 231
Providence, Rhode Island 02903-4231





DIVISION OF BANKING

233 Richmond Street, Suite 231
Providence, Rhode Island 02903-4231
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Banking Bulletin Number 2003-2

Prohibited Net Branches & Net Branching Arrangements

The Department of Business Regulation ("Department") Division of Banking is responsible for the licensing and regulation of various activities as described in R. I. Gen. Laws §19-14-1 *et seq.* and §19-14.1 *et seq.* (the "Licensing Statutes"), including lending and loan brokering activities.

It has come to the Department's attention that some Rhode Island licensed lenders and loan brokers are engaging in prohibited types of "branch office" arrangements referred to as "net branches". This bulletin provides guidance and clarification regarding the Department's requirements for branch offices of Rhode Island licensed lenders, small loan lenders and loan brokers.

Net Branch – A net branch is an office at which a lender, small loan lender or loan broker allows a separate company, lender, small loan lender or loan broker that does not hold a valid Rhode Island lender, small loan lender or loan broker license, to originate loans under the Rhode Island licensed lender, small loan lender or loan broker license.

Net Branch Arrangement – A net branch arrangement is an arrangement in which a Rhode Island licensed person or entity enters into an agreement whereby its designated branch manager has the appearance of ownership of the licensee by, among other things, sharing in the profits and/or losses¹, establishing, leasing or renting the branch premises, entering into other contractual relationships with vendors such as telephones, utilities, and advertising, having control of a corporate checkbook, and/or exercising control of personnel through the power to hire or fire such individuals. An entity may be considered to be utilizing a net branch if the net branch agreement requires the branch manager to indemnify the licensee for damages from any apparent, express, or implied agency representation by or through the branch's actions or if the agreement requires the branch manager to issue a personal check to cover operating expenses whether or not funds are available from an operating account of the licensee.

¹ A branch manager's compensation that is based upon the net profit of the branch is an acceptable branch compensation arrangement if the Licensee collects the revenue from the branch, pays the branch expenses including the compensation of all employees of the Licensee main and branch offices, and then pays the branch manager the remaining revenues, if any, as a commission. The distinction between an acceptable and unacceptable branch compensation plan is whether the Licensee pays the expenses of the branch. If the Licensee pays the expenses, the arrangement is acceptable. If, however, the expenses are paid by the branch manager form a personal or non-Licensee account (or by some third party), the arrangement is prohibited.

The purpose of this bulletin is two-fold:

- 1. For Lenders and Loan Brokers currently licensed, the Division is issuing this Bulletin to clarify that "net branches" and "net branching arrangements" are prohibited. It is a violation of state law for a Rhode Island licensed lender, small loan lender or loan Broker to pay, *directly or indirectly*, a fee to any person or entity not properly licensed pursuant to the Licensing Statutes.
- 2. For individuals or entities not yet licensed, please be advised that Rhode Island Law prohibits any individual or entity not properly licensed from receiving any fee(s) in connection with loan brokering activities described under the Licensing Statutes.

Please be aware that violations of Chapter 19-14-1 et seq. may result in serious penalties as delineated below:

- 1. For Rhode Island licensed lenders, small loan lenders and loan brokers licensed, the Department may initiate a license revocation or suspension proceeding pursuant to R. I. Gen. Laws §§ 19-14-13 or 19-14-15 and/or seek forfeiture of interest, fees and charges pursuant to R. I. Gen. Laws §§ 19-14-26 and 19-14-26.1.
- 2. For individuals or entities not licensed, violations may result in the issuance of a cease and desist order by the Department pursuant to R. I. Gen. Laws §§ 19-14-23 and/or criminal penalties and fines under to R. I. Gen. Laws §§ 19-14-23, 19-14-26 and 19-14-26.1. Lenders, small loan lenders and loan brokers should review their respective responsibilities under the Licensing Statutes carefully and act accordingly.

The Division will conduct field audits and/or desk examinations to ensure compliance with these provisions.

Marilyn Shannon McConaghy, Esq. Director, Department of Business Regulation Effective Date: October 3, 2003